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**REVOCATION OF POWER OF
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Application Number	10/680,148
Filing Date	10/08/2003
First Named Inventor	RICARDO SAIKALI
Art Unit	3728
Examiner Name	?
Attorney Docket Number	3854-00205

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

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OR

<input checked="" type="checkbox"/> Firm or Individual Name	RICARDO SAIKALI				
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	RICARDO SAIKALI		
Signature	<i>Ricardo Saikali</i>		
Date	AUGUST 26 2004	Telephone	905-403-9642

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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Approved for use through 11/02/2004, Case 99-1-0225
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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number: 10/680148
 Filing Date: 10/26/2003
 First Named Inventor: RICARDO SAIKALI
 Art Unit: 3720
 Examiner Name: ?
 Attorney Docket Number: 3889-00205

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☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(p) is enclosed. (Form PTO/SB/76)

SIGNATURE of Applicant or Assignee of Record

Name: RICARDO SAIKALI
 Signature: [Signature]
 Date: August 20, 2004 Telephone: 905-403-9642

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10/680148